SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

## Article - Health - General

19 - 712.5.

- (a) A health maintenance organization shall reimburse a hospital emergency facility and provider, less any applicable co-payments, for medically necessary services provided to a member or subscriber of the health maintenance organization if the health maintenance organization authorized, directed, referred, or otherwise allowed the member or subscriber to use the emergency facility and the medically necessary services are related to the condition for which the member was allowed to use the emergency facility.
- (b) A health maintenance organization shall reimburse a hospital emergency facility and provider, less any applicable co-payments, for medically necessary services that relate to the condition presented and that are provided by the provider in the emergency facility to a member or subscriber of the health maintenance organization if the health maintenance organization fails to provide 24-hour access in accordance with the standards of quality of care required under § 19-705.1(b)(2) of this subtitle.
- (c) A health maintenance organization shall reimburse a hospital emergency facility and provider, less any applicable co-payments, for medical screening, <u>ASSESSMENT, AND STABILIZATION</u> services rendered to meet the requirements of the Federal Emergency Medical Treatment and Active Labor Act.
- (d) Notwithstanding any other provision of this subtitle, a provider may not be required to obtain prior authorization or approval for payment from a health maintenance organization in order to obtain reimbursement under subsection (a), (b), or (c) of this section.
- (e) Notwithstanding any other provision of this article, a hospital emergency facility or provider or a health maintenance organization that has reimbursed a provider may collect or attempt to collect payment from a member or subscriber for health care services provided for a medical condition that is determined not to be an emergency as defined in § 19-701(d) of this subtitle.
- (F) A HEALTH MAINTENANCE ORGANIZATION'S REIMBURSEMENT POLICIES AND PATIENT TRANSFER REQUIREMENTS MAY NOT, DIRECTLY OR INDIRECTLY, REQUIRE A HOSPITAL EMERGENCY FACILITY OR PROVIDER TO VIOLATE THE FEDERAL EMERCENCY MEDICAL TREATMENT AND ACTIVE LABOR ACT.
- (C) IF A MEMBER OR SUBSCRIBER OF A HEALTH MAINTENANCE ORGANIZATION IS TRANSFERRED FROM A HOSPITAL EMERCENCY FACILITY TO ANOTHER MEDICAL FACILITY, THE HEALTH MAINTENANCE ORGANIZATION SHALL REIMBURSE THE TRANSFERRING HOSPITAL EMERGENCY FACILITY AND PROVIDER, LESS ANY APPLICABLE CO PAYMENTS, FOR SERVICES PROVIDED TO STABILIZE THE MEMBER OR SUBSCRIBER IN ACCORDANCE WITH THE FEDERAL EMERGENCY MEDICAL TREATMENT AND ACTIVE LABOR ACT.